

2005 **FR 900M** 

2005

**FR 900M** 

**Employer's Withholding Tax Booklet** 

Monthly Returns and Annual Reconciliation

Secure - Accurate - Convenient ...

File Electronically Today! www.cfo.dc.gov/etsc



FR 900M (REV. 07/20/04)







- Instructions
- · Request for Withholding Tax Forms
- 2005 Monthly Withholding Tax Returns — FR-900M
- 2005 Annual Reconciliation and Report - FR-900B
- · Address Labels for Monthly Returns
- Employer's Monthly Withholding Record

## **IMPORTANT**

- We encourage you to file and pay electronically. See our web site, www.cfo.dc.gov for details. Payments may also be made at any Wachovia Bank in DC.
- Enter whole dollar amounts do not use cents. Round all cents to the nearest dollars.
- If you complete a paper return, mail it and your payment using the address labels in the back of this booklet. The address is: Office of Tax and Revenue, PO Box 7792, Washington DC 20044-7792.
- Mail the Annual Reconciliation and Report FR-900B and any payment to the Office of Tax and Revenue, 6th Floor, 941 North Capitol St NE, Washington DC 20002-4265.
- · You must include your Federal Employer Identification Number (FEIN) or Social Security Number (SSN) on all W-2 forms issued to employees from whom you withheld DC taxes.
- Make the check or money order payable to the DC Treasurer. Write your FEIN or SSN, FR-900M or FR-900B and the tax period on your payment.
- You must file your FR-900M returns and the FR-900B even if you withheld no tax or nothing is due.







### **Filing Period and Due Dates**

Your FR-900M return is due by the 20th day of the month following the month being reported. For example, the January 2005 return is due February 20, 2005.

#### Who must file?

Every employer who withholds DC income tax from an employee must file a DC Withholding Tax Return. If your liability exceeds \$25,000 in any month, you must file electronically. See www.cfo.dc.gov

**NOTE:** If your monthly withholding amount is consistently less than \$100, call the Office of Tax and Revenue (OTR) at (202) 727-4TAX(4829) to change your filing frequency from monthly to annual.

#### **Forms**

This booklet has all the forms and instructions you will need file your returns. It is mailed to each registered taxpayer that does not file

electronically or with a substitute form. You are responsible for filing and paying taxes on time whether or not you receive the forms.

### **Payments**

Write your FEIN or SSN, FR-900M or FR-900B, and the tax year on your check or money order. Make it payable to the DC Treasurer; mail it with your return to Office of Tax and Revenue, PO Box 7792, Washington, DC 20044-7792. You may pay electronically, see <a href="https://www.cfo.dc.gov">www.cfo.dc.gov</a>. In addition, you may also pay at any DC branch of the Wachovia Bank.

#### **Dishonored checks**

You will be charged \$65 for any check returned to us.

#### **Submission of Forms W-2**

You must send copies of every Form W-2 you issued showing your





FEIN or SSN and the amount of DC income tax withheld during the year. Send your Forms W-2 attached to your FR-900B. You may submit a magnetic tape or ADP printout instead of Forms W-2. The FEIN or SSN must be entered on each Form W-2 issued to DC resident employees. Mail Form W-2 magnetic tapes to: Office of Tax and Revenue, ISA, 941 North Capitol St NE FL3, Washington DC 20002-4234. If the number of W-2s is large, you may package them in convenient sizes. If you do so:

- · Number the packages consecutively.
- Write the employer's name, address and FEIN on each package.
- Mail the forms W-2 separately from the Form FR-900B (Annual Reconciliation and Report) and write the number of packages containing forms W-2 on a cover sheet with the employer's name.
- Send the payment of any tax owed with the FR-900B. Attach a brief statement that the forms W-2 are being mailed in separate packages.

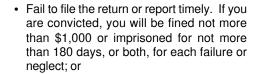
### **Penalty and Interest Charges**

OTR will charge:

- A penalty of 5% per month if you fail to file a return or pay any tax due on time. It is computed on the unpaid tax for each month, or fraction of a month, that the return is not filed or the tax is not paid. It may not exceed an amount equal to 25% of the tax due.
- A 20% penalty on that portion of an underpayment of taxes attributable to negligence. Negligence is a failure to make a reasonable attempt to comply with the law or to exercise ordinary and reasonable care in preparing tax returns without the intent to defraud. One indication of negligence is a failure to keep adequate books and records.
- Interest of 10% per year, compounded daily on a late payment.

#### **Criminal Penalties**

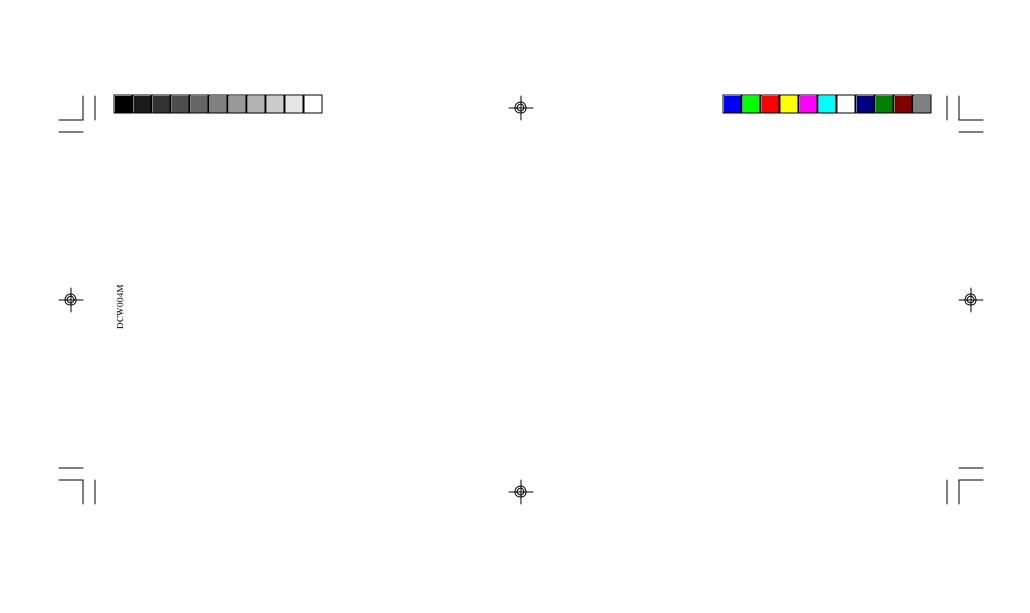
You will be penalized if you are required to file a return or report, or perform any act under these provisions and you:



- Willfully fail to file the return or report timely.
   If you are convicted, you will be fined not more than \$5,000 or imprisoned for not more than 180 days, or both.
- Willfully attempt to evade or defeat a tax; or willingly fail to collect, account for, or pay a tax. You may be subject to other penalties (see DC Code §47-4101 and 4102).
- These penalties are in addition to penalties for false statements under DC Code §22-2514 and any other applicable

# FORM FR-900B — ANNUAL RECONCILIATION AND REPORT Instructions

- Line 1 Enter your total DC income tax withheld during 2005 as shown on the Withholding Statements (W-2s). If you were not required to withhold, leave blank.
- Line 2 Enter your total DC income tax withheld and paid to the DC during the reporting period.
- Line 3 If Line 1 is more than Line 2, enter the difference on Line 3.
- Line 4 If you do not pay your tax due (Line 3), or do not file your return timely, calculate the penalty. The penalty is 5% per month, or fraction of a month, of the tax due. The penalty may not exceed an amount equal to 25% of the tax due.
- Line 5 Calculate the interest at the rate of 10% per year, compounded daily on any tax and penalty due.
- **NOTE:** Calculate the penalty and interest from the due date of the return to the date the tax is paid.
- Line 6 Add Lines 3-5 and enter the total.
- Line 7 If the amount on Line 1 is less than the amount of Line 2, enter the difference on Line 7.

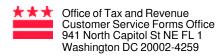


# REQUEST FOR WITHHOLDING **TAX FORMS**

Need more forms? Complete this form and send it to the address shown to the right.

Withholding Tax Forms	Number Needed
FORM D-4 Employee's Withholding Allowance Certificate	
FORM D-4A Certificate of Non-Residence in the District of Columbia	

DC Forms D-2 are NO LONGER ISSUED. Use federal Forms W-2.



## PRINT YOUR NAME AND MAILING ADDRESS BELOW

Business Name		
Trade name		
Business address (Mailing Address)		
City	State	Zip Code
Oity .	State	Zip Gode



Government of the District of Columbia	2005 FR-900M Employer Wit Tax — Monthly Return	hholding		
Taxpayer Identification Number	Tax period ending (MM/	DD/YYYY)		
Business name	Fill in  if SSN			FICIAL USE ONLY
Fill in fthis is Mailing address line 1	s your first return or if your address changed from your last r	eturn Account ID		Fill in if this is your final return
Mailing address line 2				DOLLARS ONLY
		3. Tax di	ue \$	.00
City	State Zip Code	4. Pena	alty \$	.00
DC income tax withheld this month	\$	<b>00</b> 5. Intere	est \$	00
Adjustment for this year     Fill in if minus	DOLLARS ONLY	<b>00</b> 6. Total	I due	00
		2005 FR-900M	P1	

FR-900M Page 2				
FEIN				
PLEASE SIGN HERE	Under penalties of law, I declare that, to the best of my k Declaration of paid preparer is based on all the information Taxpayer's signature	nowledge, this return is correct. on available to the preparer.  Title	Date	Telephone number of person to contact
PAID PREPARER ONLY	Preparer's signature (if other than taxpayer)  Firm name		Date	Preparer's FEIN, SSN or PTIN

2005 FR-900M P2

Make check or money order payable to the DC Treasurer. Include your FEIN, "FR-900M" and tax year on your payment. Mail return and payment to: Office of Tax and Revenue, PO Box 7792, Washington DC 20044-7792.

Firm address

Government of the District of Columbia		Employer Withh leconciliation an						
Taxpayer Identification Number	Fill in if FEIN	Tax Year Ending 12/31/2005			0 5 9	0 0 0 2 FOR OFFICI		
Business name				Account ID				
Fill in iftl	oje je vour firet roturn or if vou	ır address changed from you	r lact roturn				Due Date 1/31/2	2006
Mailing address line 1	iis is your iii st returi or ii yot	ir address changed norn your	i iast return			DO	LLARS ONLY	
maining data ross into 1				<ol> <li>Additional Tax (if Line 1 is mo</li> </ol>				00
Mailing address line 2				4. Penalty				00
City	S	tate Zip Code		5. Interest				00
DC income tax withheld			00	6. Total Due				00
this year per W-2s  2. Total withholding tax paid to DC this year on			00	7. Overpayment (if Line 1 is less				00
Forms FR-900M	5 FR-900B P1 DO	LLARS ONLY	00			onthly return. This return roll. Attach Forms W-2 to	is due January 31, 2006 or o this form.	

FR-900B Par Taxpayername	ge 2			
PLEASE SIGN HERE	Under penalties of law, I declare that to the bes on all the information available to the preparer.  Taxpayer's signature	of my knowledge, this return is correct. De		Telephone number of person to contact
PAID PREPARER ONLY	Preparer's signature (if other than taxpayer) Firm name Firm address		Date	Preparer's FEIN, SSN or PTIN
	hook or manay order navable to the DC T			_

Make check or money order payable to the DC Treasurer. Include your Federal Employer ID Number, "FR-900B" and tax year on your payment.

Mail return and payment to: Office of Tax and Revenue, 941 North Capitol St NE, 6th FI, Washington DC 20002-4265.

2005 FR-900B P2



# FR-900B PAGE 3 $\,$ Attach to and mail with pages 1 and 2 $\,$

Taxpayername

FEIN\_

		Employer's DO	withholding tax recor	ciliation		
	Date Paid	Tax Paid	Penalty	Interest	Total Amount Paid	Explanation
1						Explanation
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
Total for the	year					
			200	5 FR-900B P3		

DCW011M

 Intillation of taxand revenue PO BOX 7792
WASHINGTON DC 20044-7792

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 Intillimition Intillimition Intillimition Intillimition OFFICE OF TAXAND REVENUE PO BOX 7792 WASHINGTON DC 20044-7792

DCW012M/A  EMPLOYER'S  MONTHLY WITHHOLDING RECORD
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≥ _	MONIHLY WITHHOLDING		KECOKD
MONTH	DC PAYROLL TAX WITHHELD	X WITHHELD	DATE PAID
JAN			
FEB			
MAR			
APR			
MAY			
JUNE			
JULY			
AUG			
SEPT			
ОСТ			
NON			
DEC			
	RECONCILIATION	IATION	
Annual Payroll	(a) Payroll Tax Paid	(b) Tax per W-2s	Difference (Block a minus Block b)